

**KENTUCKY COMMISSION  
ON  
SERVICES AND SUPPORTS  
FOR INDIVIDUALS WITH MENTAL RETARDATION  
AND OTHER DEVELOPMENTAL DISABILITIES**

**September 19, 2005  
Fair Oaks, 4<sup>th</sup> Floor  
Frankfort, Kentucky**

**MEMBERS PRESENT**

Secretary James W. Holsinger, Chair	Senator Julie Denton
Acting Commissioner Rebecca J. Cecil	Karen Gardner
Commissioner Shannon Turner	Patricia Dissell
Beth Smith	Dan Baker
Pat Seybold	Louise Underwood
Glenna Taylor	Harold Kleinert
Marsha VanHook	William Shaw
Malkanthie McCormick	Roland Mullins
Gwynn Royster	

**MEMBERS ABSENT**

Representative Stephen Nunn  
Gayle Rees  
F. Roy Shirley  
Representative Jimmie Lee  
Terry Leigh  
Cathy Edwards

**OPENING REMARKS AND INTRODUCTIONS**

Secretary Holsinger opened the meeting by welcoming the members. Commission members then introduced themselves.

**REVIEW OF MINUTES**

The minutes of the June 20, 2005 meeting were reviewed and accepted as written.

## **UPDATE ON THE DEPARTMENT FOR MENTAL HEALTH/MENTAL RETARDATION SERVICES (COMMUNITY AND FACILITY)**

Acting Commissioner Rebecca J. Cecil gave an update on the situation at Oakwood. Oakwood has received a notice from CMS for the termination of Medicaid funding from Centers for Medicare and Medicaid Services (CMS) effective September 14, 2005. However, funding will continue for 30 days from the date of notice to allow the Cabinet for Health Services to appeal the notice and to relocate residents to alternative facilities. Commissioner Cecil also went on to say that Central State has also received a Type A citation with a 23 day termination notice from CMS. The Cabinet is working on resolving all issues with the above mentioned facilities.

## **REVIEW OF 2005 SUBCOMMITTEE STRUCTURE**

An outline of the proposed subcommittee structure was provided to Commission members and reviewed by Betsy Dunnigan, Acting Director of the Division of Mental Retardation. She stated that items under the existing ten-year plan are being reviewed. From this review, several items have been prioritized. As a result, three subcommittees are being proposed. They are Quality and Best Practices, SJR85: Aging Caregivers, and Funding Sources. Members from the Commission were included in the proposed structure. Commission members agreed that the subcommittees should be open to non-commission members and that recommendations can be made to Ms. Dunnigan.

Ms. Dunnigan spoke of the need to look beyond the current funding structure, considering Medicaid deficits in Kentucky and other states. She talked about the benefits and necessity of implementing a plan that is based on a tiered level of needs, a plan that may be more cost-effective.

The SJR85 Aging Caregivers report needs to be presented by April, 2006.

## **INTERAGENCY TRANSITION COUNCIL**

An overview was given on the mission of the council by Michelle Blevins of the Division of Mental Health and Substance Abuse, Beth Harrison from the Interdisciplinary Human Development Institute, and Brad Mills from the Office of Vocational Rehabilitation. The council deals with transition from high school to the community for Kentucky's at risk youth that have disabilities. One member suggested that the council work with the Education Department to do outreach for parents so that they could know what is available to their children.

## **UPDATE ON 1115 MEDICAID WAIVER/REPORT ON MEDICAID CHANGES**

Commissioner Shannon Turner from the Department for Medicaid Services presented this update. The lavender paper (2) entitled Kentucky Health Choices: Kentucky's Medicaid Transformation was distributed to the Commission members and public attendees. As a demonstration waiver, this proposal gives Kentucky more flexibility and state-level authority to make changes.

The main goals of the transformation are to stretch resources, maximize the use of services in the home, and utilize plans based on consumers' specific needs.

Commissioner Turner discussed other aspects of the new waiver and the future of Medicaid. Features include developing staggered/tiered levels of care, ensuring that Medicaid truly is the payer of last resort, and paying insurance premiums rather than having to pay out full cost of claims. The Tobacco Settlement money may be a possible funding source for Medicaid. Other considerations include making Medicaid qualified to get public health or MHMR funds to create limited benefits for consumers not eligible for Medicaid, having KCHIP administered by a private insurance company rather than by Medicaid, and encouraging consumer participation in disease and care management. She also noted that the various components of new waiver will be phased in over time.

#### **UPDATE ON CONSUMER DIRECTED OPTION**

Acting Director Dunnigan reported that Medicaid is working on contract amendments with existing providers (First Health and EDS) to do Support Brokerage and Financial Management services respectively. She also stated that the first phase of enrollment for the program is targeted to begin in January, 2006 for the Home and Community Based (HCB) consumers and March, 2006 for Supports for Community Living (SCL) consumers pending the finalization of the contracts for Support Brokerage and Financial Management.

#### **NEXT MEETING**

Next meeting date is **December 12, 2005** from **1 p.m. to 4 p.m.**  
The meeting was adjourned.